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AYURVEDIC PROPRIETARY INTERVENTION IN LEUCODERMA (SHVITRA): A **CASE STUDY**

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ABSTRACT

Ayurveda mentions all types of skin disorders under one common term i.e., Kushtha Roga. Shvitra is explained in the classics as a type of Kushtha. The disease is said to be result of impairment of Tridosha and Dhatu such as Rakta, Mamsa and Meda. Signs and symptoms of Shvitra and vitiligo resemble closely, hence the two diseases are co-related as well. The cause of vitiligo is yet unclear and is believed to be an auto-immune disease. Modern science has limited treatment options to address this concern. Whereas, in Ayurveda, although the disease is termed as Kricchasadhya (difficult to treat) or Asaadhya, yet many treatment options are advised. This case report elucidates the therapeutic effect of Ayurveda treatment modality in a patient having progressive leucoderma. A 21-year-old female patient with complaints of whitish-lesions over forehead, neck and back having moderate itching and pre-diagnosed with leucoderma visited our OPD. After the treatment for 11 months, significant changes were observed in the shape and size of lesions.

Keywords: Leucoderma, Shvitra, Vitiligo, Autoimmune, Kushtha

INTRODUCTION

Vitiligo is a non-congenital, auto-immune disorder which is characterized by the presence of white

patches with distinctive borders on the skin. About 0.5%-2% of the world's population is believed to be affected by this disease and equal prevalence in both males and females is observed. [1] Melanocytes, skin pigmenting cells are selectively lost resulting in white chalky and non-scaly macules. The lesions present on the skin are often referred to white macules if their size is less than 1 cm. Appearance of vitiligo patches can begin at any age and often advances in a sporadic manner. Depigmentation is very symmetrical in its spread and the spread begins with the fingers, toes, forearms, elbows, upper arms followed by the area around the lips and eyelids. [2] It affects the appearance of a person which may leads to social stigma in people suffering from the disease. As a result of which, it may impact mental health arising psychological diseases.

Ayurveda has described all the skin diseases under a broad term *Kushtha Roga*. *Shvitra* is one of the *Kushtha Roga* that closely correlates with the signs and symptoms of Vitiligo. It is considered that vitiated *Vata Dosha* in combination with aggravated *Pitta* and *Kapha Dosha* enters into *Sira* (blood channels) and spreads over the entire body surface through this medium. Aforesaid *Dosha's* gets accumulated at certain skin sites resulting in the appearance of white patches. [3]

Modern medicine has limited options to offer in this disease and the chances of relapse are also quite evecatching. A total relapse rate of 34.2 % was observed in the cured patients of vitiligo. [4] Whereas, Ayurvedic treatment, on the other hand has shown promising outcomes now and then. Being a chronic disease, Avurveda treatment is much safer and effective as compared to modern medicines available for longterm use. Being an auto-immune disease, any triggering factor can aggravate the disease specifically related to psychological concerns such as stress. A positive relation between stress and vitiligo has been established in many studies. [5] Considering the chronicity of disease and to avoid the chances of reoccurrence, Shodhana therapy was also indicated followed by the Shamana therapy.

Patient History

A 21-year-old female visited our OPD facility at Delhi-NCR in 2023 having Patient ID AK000000973.

She presented complaints of white patches over forehead, neck and back region for 11 years. The patient was apparently healthy 11 years back after which she developed an eye allergy. She had administered oral allopathic medication for a considerable time period for the same. Post treatment, she observed appearance of white patches over forehead followed by another one on the same site over the course of time. The patient went for allopathic treatment for white patches, but no improvement was there. Later on, she observed that the size of patches kept on increasing Along with the appearance of new patches on neck and back region. Further moderate body itching also started to appear. Then, she decided to opt for Ayurvedic treatment and visited our OPD facility for the same.

On further enquiry, a positive paternal family history was found. No surgical history was present. No history of Diabetes Mellitus, hypertension, thyroid disorder or PCOD was found.

Personal History

The patient was unmarried and student by profession, vegetarian diet consumer and had complaints of anxiety, depression, mood swings, stress and negative thoughts. No abnormality found in menstrual history. Patient was on laxatives for regular bowel moment, normal micturition, normal appetite, disturbed sleep, uncoated tongue and no pallor and icterus were observed.

Clinical Findings

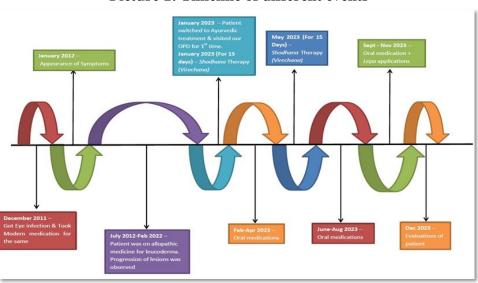
After obtaining the informed consent, the patient was examined. General examination revealed multiple patches present on forehead, both anterior and posterior part of neck, chest and over elbow region of right arm having variable dimensions. All the patches were chalky-white in color, asymmetrical with well-defined margins and non-scaly in nature. Her blood pressure was 110/70 mmHg, pulse rate 67/min, regular. On systemic examination, no anomaly was detected.

Diagnostic Criteria

The patient was a pre-diagnosed case of leucoderma. Also, the complaints presented by the patient were clinically related and on the basis of signs and symptoms, she was diagnosed as a case of *Shvitra*. The evaluation of the patient was done on the basis of changes observed in the lesion shape and size.

Timeline of Events

The progressive history of events in systematic manner is depicted in Picture 1:



Picture 1: Timeline of different events

Therapeutic Intervention

Before beginning the treatment, informed consent was obtained from the patient and the process was well-explained. The treatment regimen was planned on the account of both lesions as well as psychological assessment of the patient. Keeping in view the aggressive progression of the disease, the patient was advised for both *Shodhana* and *Shamana* treatment. The treatment regimen was divided into three phases, in the first two phases *Virechana Karma* was performed followed by oral medication for 3 months. *Abhyantra* and *Bahya Snehana* followed by *Sarvanga Swedana* was given to patient prior to *Virechana Karma*. Both the time *Madhyam Shuddhi* with 10

Vega during 1st time and 12 Vega during 2nd time were reported. No complications were observed during both times. The procedure was then followed by five days of Samsarjana Krama (post therapy dietary regimen) during each time. This included Peya (gruel prepared from Barley with more liquid content), Vilepi (thick rice gruel) and Yusha (green gram soup) followed by Pathya diet. After 3 days of Samsarjana Krama, oral medication was started during both times.

In the third phase of the treatment, *Lepa* was also prescribed. Details of the treatment regimen are mentioned in Table 1.

Table 1: Details of *Shodhana* Therapy planned for the patient

Procedure	Drug and Dosage	Duration
Snehapana (Internal	Panchtikta Ghrita was started at 30ml dose on 1st day, 60ml on 2nd, 90ml on	5 days
oleation)	3 rd , 100ml on 4 th and 120ml on 5 th in morning empty stomach with lukewarm	
	water.	
Abhyanga and Sar-	After achieving Samyak Snigdha Lakshana (proper oleation), Abhyanga	2 days
vanga Swedana (Ex-	(body massage) with Pind Oil was started every morning for 30 mins for 2	
ternal oleation and	days followed by Sarvanga Swedana (fomentation) with Dashmoola Kvatha	

fomentation)	for 10 mins.	
Virechana (therapeutic	In the morning time after body massage and fomentation, Virechana yoga	
purgation)	(Erand taila 50ml + Trivrit Churna 10g + Triphala Churna 10g + Kutki 5g)	
	was administered. During the first time, 10 vega and during the second time	
	12 vega were observed. The same procedure and medicines were adminis-	
	tered during both times.	
Samsarjana Krama	Peya- on the same evening and Day1 after procedure, Vilepi- Day 2 and Day	5 days
(post therapy dietary	3 morning after procedure, Yusha- Day 3 evening and Day 4 after procedure	
regimen)	and Pathya Aahara- Day 5 after procedure.	

After 3 days of *Samsarjana Krama*, when the patient regained her strength, was administered with oral medication for *Shamana* Therapy for a duration of 3 months in all the three phases of treatment. Details are mentioned in Table 2.

Table 2: Details of Shamana Therapy advocated to patient

Name of medicine	Ingredients	Dose	Adjuvant
Leucodum Care Capsule	Bakuchi seed (Psoralea corylifolia) + Neem chhal	500 mg OD after	Water
	(Azadirachta indica)+ Mandukparni (Centella asiatica)	food	
Leucodum Care Oil	Bakuchi seed (Psoralea corylifolia) + Neem chhal	Q.S.	For L/A
	(Azadirachta indica)+Tila taila (Sesamum indicum)		
Rakta Prabha Yoga	Neem (Azadirachta indica) + Manjishtha (Rubia cordi-	1g BD after food	Water
	folia) + Kalmegh (Andrographis paniculata) + Giloy		
	(Tinospora cordifolia) + Daruhaldi (Berberis aristata)		
	+ Triphala (three myrobalans) + Chirayata (Swertia		
	chirata)		
Rakta Rasayana Vati	Sarsaparilla (Smilax ornate) + Chicory (Cichorium	375 mg TDS	Water
	intybus) + Dandelion (Taraxacum officinale) + Man-	after food	
	jishtha (Rubia cordifolia) + Shuddha Gandhak (Purified		
	Sulphur) + Trikatu + Triphala		
Aarogyavardhini Vati	Classical formulation [6]	500 mg BD	Water
Lepa	Bhringraja + Vidanga Churna in equal quantity mixed	Q.S.	For L/A
	with water		

L/A- Local Application, Q.S. – Quantity Sufficient

Dietary recommendations: Patient was advised to avoid fried, processed food and spicy food, citrus fruits, canned fruit juices and beverages, milk and milk products, white bread and kidney beans. She was recommended to have home-cooked meals having less oil, ghee and spices.

Follow-up and Outcome

The lesions present on the skin were assessed in terms of their dimensions on the completion of 1st and

2nd phase of the treatment to evaluate the outcome of the treatment. It was observed that the size of lesions was reduced in terms of its dimensions and the complaint of itching went down to mild after completion of 1st phase of treatment. After the 2nd phase, itching completely subsided. No adverse events were reported during the entire treatment course. The changes observed in the dimensions of lesions can be seen in Picture 2.

Picture 2: BT and AT Pictures of the lesions on different body part of patient

Before



After

Lesions of forehead region





Lesions of neck and back

DISCUSSION

Ancient seers have described all the types of skin disorders under Kushtha. Both Charaka and Sushruta have explained the details of Shvrita under Kushtha Adhyaya only. Charaka has mentioned Shvitra as a type of Kilaasa. Vitiation of Tridosha (Vata, Pitta & Kapha) and involvement of Dhatu's (Rakta, Mamsa & Meda) are observed in this disease. He mainly emphasized *Dhatu's* as the main culprit. [7] But Acharya Vagbhatta believed that there is equal involvement of Dosha and Dhatu in the occurrence of disease. [8] Etiological factors of Shvrita and Kushtha are described as similar in all ancient texts. Indulgence in causative factors (Nidaana) of the disease results in the depletion (Kshaya) of localized Bhrajaka Pitta (a subtype of Pitta Dosha) and results in hypopigmentation of skin (Twaka Shwetata). Signs and symptoms described in classical texts for Shvitra and those mentioned by contemporary science for Vitiligo are much

similar. Hence, the two diseases are compared. [9] While describing the line of treatment for Shvitra, Acharya Charaka states the judicious use of Shodhana therapy followed by Shamana therapy. Application of Lepa on the affected sites is also advised in classics. [10] Based on these fundamentals, treatment regimen of the patient was planned. Snehana and Svedana were planned to bring the vitiated Dosha's from Shakha (extremities) to Koshtha (abdomen) to facilitate their easy letting out letting from the body. Predominantly, Vata-Shamaka Taila (oils) and Kwatha (decoction) were used. After this, Virechana (therapeutic purgation) was performed to expel out the collected Dosha's into Koshtha (abdomen). Owing to Tikshna (sharp), Ushna (hot), Sukshma (penetrating) and Vyavayi- Vikasi (quickly spreading) properties of Virechana Dravya used, it removes Dosha's not only from stomach but from entire body. [11] post-purification, the remaining *Dosha's* are alleviated by the means of *Shamana* therapy i.e., oral administration of medicines.

Medicines prescribed to patients were having a combination of ingredients such as Nimba, Giloy, Bakuchi, Manjishtha, Shuddha Gandhak etc. Both Nimba and Giloy are said to possess Katu-Tikta Rasa (pungent-bitter in taste) and have Tvakadoshahara property (pacifies skin diseases). [12] [13] Bakuchi is considered as an important ingredient in Ayurveda for managing the cases of Shvitra. Many studies have concluded that oral administration as well as topical application shows promising results in its treatment. [14] Oral intake of Shuddha Gandhaka in combination with other drugs has proven to be efficacious in treating the cases of Shvitra. [15] In another study, Manjishtha when administered orally along with Bakuchi and Aarogyavardhini vati provides beneficial results in patients of vitiligo. [16] Aarogyvardhini Vati contains Kutki as a major ingredient and studies have reported its positive utility in the treatment of vitiligo. [17]

CONCLUSION

Shvitra (Vitiligo) is a dermatological condition affecting the physical (cosmetically unappealing), mental (stress and depression) and social (stigma) well-being of the patient. Modern approach is unable to yield desirable results and has greater chances of relapse. Outcome of this study reveals that Ayurvedic treatment is much effective in treating such chronic cases delivering beneficial results to the patient.

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